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December 1, 2009

Dear Mental Retardation/Related Disabilities (MR/RD) Waiver Participant and Family Members:

The Centers for Medicare and Medicaid Services (CMS) has approved changes to the MR/RD Waiver. These changes will go into effect January 1, 2010 and will likely affect you. The changes are:

- The following services are being ***eliminated*** since they are covered under regular Medicaid:
 - Physical Therapy;
 - Occupational Therapy; and,
 - Speech/Language Pathology.
- Daily respite is replaced by hourly respite.
- Day Habilitation, Prevocation, and Supported Employment are being replaced by Day Activity, Community Services, Support Center, Career Preparation, and Employment.
- Service use caps are being placed on the following services:
 - Adult Companion – capped at a maximum of 28 hour per week (Adult means 21 years of age or older).
 - Adult Attendant – capped at a maximum of 28 hour per week (Adult means 21 years of age or older).
 - Personal Care II – capped at a maximum of 28 hour per week.

The waiver participant may use a single service or combine Adult Companion, Adult Attendant, and Personal Care II Services. The single service or any combination of the three (3) services cannot exceed 28 hours per week.

DISTRICT I

P.O. Box 239
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Midlands Center - Phone: 803/935-7500
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DISTRICT II

9995 Miles Jamison Road
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Phone: 843/832-5576

Coastal Center - Phone: 843/873-5750
Pee Dee Center - Phone: 843/664-2600
Saleeby Center - Phone: 843/332-4104

- In-Home Respite is capped at a maximum of 68 hours per month unless any one (1) of the three (3) conditions is present. If so, you may receive up to 240 units per month upon DDSN approval:
 1. Caregiver has been hospitalized or is receiving medical treatment causing the caregiver to be away from home for lengthy periods during the day for which respite takes the place of the caregiver to protect the health, safety, and welfare of the waiver participant.
 2. The waiver participant is medically complex or severely disabled to the extent that the caregiver must provide him/her constant hands on/direct care and supervision for which the caregiver is not paid for 16 hour of a 24-hour day.

A Medically Complex person is a person who has serious and complex medical condition resulting in substantial physical impairment or disability requiring comprehensive care management defined as extensive hands-on assistance or total care on a routine basis. Such persons need extraordinary supervision and observation or frequent or life saving administration of specialized treatments.

A Severely Disabled person is a person who has substantial physical or behavioral impairment or disability such that the degree of impairment or disability requires extensive hands-on assistance or total care on a routine basis.

In both cases the emphasis is on the characteristics of the management of the condition/impairment/disability versus the condition itself, and the hardship the complexity of managing the condition/impairment/disability places on the caregiver.

3. If support center services are unavailable to a participant age 12 to exiting high school and the primary caregiver works fulltime during the summer months of June, July, and August.

If you believe you qualify for any one of these exceptions, please contact your service coordinator or your early interventionist. Approval must be granted by DDSN.

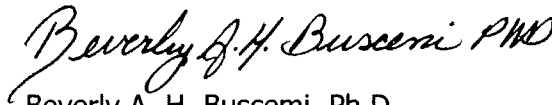
- Personal Care I is capped at six (6) hours per week.
- Nursing is capped at 56 hour per week using a LPN or 42 hours per week using a RN. If the participant receives a combination of RN and LPN nursing service, the cost of the combination cannot exceed the cost of either the maximum units of RN or the cost of the maximum units of LPN, whichever is greater.

- Specialized Medical Equipment, Supplies, and Assistive Technology is capped as follows:
 1. Liquid nutrition capped at no more than two (2) cases per month.
 2. Wheelchair limited to one (1) chair per every five (5) years at a maximum of \$8,000 per chair.
- Personal Emergency Response System is being separated from Specialized Medical Equipment, Supplies, and Assistive Technology and becoming a separate service.

NOTE: The limits approved by CMS may not be exceeded.

You should have already been contacted by your Service Coordinator (SC) or Early Interventionist (EI) about these changes. If you have not, please contact your Service Coordinator or Early Interventionist immediately. Your SC/EI will explain these changes and help you plan for the upcoming year. If you are unable to reach your SC/EI, please ask for his/her supervisor or the Executive Director.

Sincerely,



Beverly A. H. Buscemi, Ph.D.
State Director

Cc: Associate State Directors
District Directors
Ms. Janet Priest